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CONFIRMATION NO. 4890

<b>SERIAL NUMBER</b> 10/750,410	<b>FILING or 371(c) DATE</b> 12/30/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1648	<b>ATTORNEY DOCKET NO.</b> 2183-4041.3US
<b>APPLICANTS</b> Johanna Jacoba Maria Meulenberg, Amsterdam, NETHERLANDS; Joannes Maria Antonius Pol, Lelystad, NETHERLANDS; Judy Norma Aletta Bos-de Ruijter, Almere-Buien, NETHERLANDS;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/874,626 06/05/2001 ABN which is a CON of 09/297,535 10/12/1999 PAT 6,268,199 which is a 371 of PCT/NL97/00593 10/29/1997				
<b>** FOREIGN APPLICATIONS *****</b> EUROPEAN PATENT OFFICE (EPO) 96203024.3 10/30/1996				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 03/22/2004				
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/MYRON G HILL/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> NETHERLANDS	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 7
<b>INDEPENDENT CLAIMS</b> 7				
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<b>TITLE</b> Infectious clones of RNA viruses and vaccines and diagnostic assays derived thereof				
<b>FILING FEE RECEIVED</b> 1244	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	